Chesterfield County Preservation Committee



9901 Lori Road, Room 203 P.O. Box 40 Chesterfield, VA 23832-0040 Telephone: (804) 796-7192 Fax: (804) 706-7629

Email: haaschs@chesterfield.gov

[APPLICATION FOR CERTIFICATE OF APPROPRIATENESS		
Date:			
Applicant's Name:			
Address	of property for which alterations are proposed:		
Owner of	Property (if other than applicant):		
Address	of Property Owner:		
Telephor	ne Number of Property Owner:		
Signature	e of Property Owner:		
LOCATIO	ON INFORMATION		
Тах Мар	Number:		
Date Whe	en Original Portion of Structure Built:		
Date(s) o	f Subsequent Additions (if any):		
Type of A	Alteration:		
	New Construction		
	Alteration of Existing Structure(s)		
	Demolition of Existing Structure(s)		
Descripti	on of Proposed Alterations (design, materials, landscaping, etc.):		

4 Person or Company Doing Re	enovation Work:	
Other Supporting Material:		
Property Owner's Signature:		_
NOTE TO PROPERTY OWNER	R	
	lse the authority to present this ap please fill out the following statem	oplication and speak on your behalf, nent:
I,representative in all discussions	, authorize s, meetings, or transactions related	to serve as my d to this application.
	(Property Owner's Signature))
like the Secretary to preson authorize the Secretary of the application on my behalf. If the	representative can attend the Corsent this application for you, please Chesterfield County Preservation Secretary is unable to answer and application will have to be deferred.	Committee to present this ny questions that the Committee
	(Property Owner's Signature))
OFFICE	USE ONLY - DO NOT WRITE IN	THIS SPACE
APPLICATION NUMBER:		
DATE RECEIVED:	DATE REVIEWE	ED:
GRANTED		
DENIED:		
REASON FOR DENIA	AL:	
SIGNATURE OF MEETING CH	AIRPERSON:	
SIGNATURE OF SECRETARY	<u>′:</u>	